Customer Service Agent Self-Evaluation Form

Basic Information

Name
Email
Date
Self-Evaluation
How would you rate your communication skills?
C 1
C 2
C 3
C 4
C 5
How do you handle difficult customer situations?
What steps do you take to ensure customer satisfaction?
How would you assess your knowledge of our products/services?
C 1
C 2
C 3
C 4
C 5
How do you deal with stress at work?

Goals & Improvement

What are your strengths as a customer service agent?

In what areas do you feel you can improve?	
What training or support would help you perform better?	